PTO/SB/05 (03-01)
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UTILITY PATENT APPLICATION **TRANSMITTAL**

P873 US Attorney Docket No. Jeremy Emkin First Inventor Centering Brachytherapy Catheter EV 005741741 US Express Mail Label No.

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICA	ATION ELEMENTS		tant Commissioner for Patents
			Patent Application oington, DC 20231
Con Transmittal C	erning utility patent application contents. orm (e.g., PTO/SB/17)		
1. X ree Transmittal F		7. CD-ROM or CD-R in di	opendix)
2 ''	mall entity status.	8. Nucleotide and/or Amino Acid	
See 37 CFR 1.27	Total Pages 20	(if applicable, all necessary)	P 21
3. Specification (preferred arrangement set		a. Computer Readable	Form (CRF)
- Descriptive title		 b. Specification Sequence List 	ting on:
	e to Related Applications arding Fed sponsored R & D	i. CD-ROM or 0	CD-R (2 copies); or
- Reference to se	equence listing, a table,	ii. paper	
or a computer programmer of	program listing appendix		identity of above copies
- Brief Summary	of the Invention		
- Brief Descriptio	n of the Drawings (if filed)		PPLICATION PARTS
- Detailed Descr - Claim(s)	iption		(cover sheet & document(s))
- Abstract of the	Disclosure	10. 37 CFR 3.73(b) Sta	
	7	(Wileir there is all as	Document (if applicable)
4. X Drawing(s) (35 U.S	S. C. 113) [Total Sheets]	Information Display	
5. Oath or Declaration	[Total Pages 3]	12. X Statement (IDS)/P	IXI A
Nouty evec	Y Preliminary Amendment		
Copy from a	prior application (37 CFR 1.63 (d))	Return Receipt Pos	stcard (MPEP 503)
b. (for continua	ation/divisional with Box 18 compléted)	14. X (Should be specific	•
	ION OF INVENTOR(S)	15. Certified Copy of I	Priority Document(s) s claimed)
	tement attached deleting inventor(s) the prior application, see 37 CFR	Nonpublication Red	uest under 35 U.S.C. 122
1.63(d)(2) a		(b)(2)(B)(i). Applica	ntmust attach form PTO/SB/35
		or its equivalent.	
6 Application Data S	Sheet, See 37 CFR 1.76	17. Other	
18. If a CONTINUING APPLI	CATION, check appropriate box, and supply	the requisite information below	and in a preliminary amendment,
or in an Application Data Si			
Continuation	Divisional Continuation-in-part (CIP)	of prior application No.:	
Prior application information:	Examiner	Group Art Unit:	as designation to assembled surder
Box 5b. is considered a part of	ONAL APPS only: The entire disclosure of the proof the disclosure of the accompanying continuation	on or divisional application and is I	hereby incorporated by reference.
The incorporation can only	be relied upon when a portion inadvertently		pplication parts.
	19. CORRESPONDENC	CE ADDRESS	
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	(Insul Qualumer No. or Alliech bar li	ebelliere)	
Name	A STATUTA AREAS CATALO AREAS CATALO CATA		
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		,	
Address	28300 1.	<u> </u>	Zip Code
City	PATENT TRADEMARK OFFICE	State	Zip Code
Country	Telep	hone	Fax
Name (Print/Type)	Catherine C. Maresh	Registration No. (Attorne	y/Agent) 35,268
			
Signature	n is estimated to take 0.2 hours to complete. Time	will yan depending upon the reads:	Date February 8, 2002
ouruen mour otatement: This IOM	n is esumated to take 0.2 nours to complete. Time	will vary depending apon the needs	or the marriagar case. Any comments of

the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO/SB/17 (11-01)
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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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spond to a collection of info	ormation unless it displays a valid OMB control number.			
Complete if Known				
Application Number				
Filing Date				
First Named Inventor	Jeremy Emkin			
Examiner Name				
Group Art Unit				
Attorney Docket No.	P873 US			

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)				
Check Credit card Money Other None			3. ADDITIONAL FEES			
X Deposit	Account:	Order Constant	Large Entity	Small Entit	у_	
Deposit			Fee Fee Code (\$)	Fee Fee Code (\$)	Fee Description	Fee Paid
Number	012525		105 130	205 65	Surcharge - late filing fee or oath	
Deposit Account Name	Medtronic	AVE, Inc.	127 50	227 25	Surcharge - late provisional filing fee or cover sheet	
The Commissioner is authorized to: (check all that apply)		139 130	139 130	Non-English specification		
X Charge fee(147 2,520	147 2,520	For filing a request for ex parte reexamination	
=	•	s) during the pendency of this application	112 920*	112 920*	Requesting publication of SIR prior to	
to the above-ide	•	ow, except for the filing fee			Examiner action	
to the above to		ALCULATION	113 1,840	113 1,840*	Requesting publication of SIR after Examiner action	
1. BASIC FI		ALOGENTION.	115 110	215 55	Extension for reply within first month	
Large Entity [116 400	216 200	Extension for reply within second month	
Fee Fee	Fee Fee	Fee Description Fee Paid	117 920	217 460	Extension for reply within third month	·
Code (\$) 101 740	Code (\$) 201 370	Likilit. Gline for	118 1,440	218 720	Extension for reply within fourth month	
106 330	206 165	Design filing fee 740.00	128 1,960	228 980	Extension for reply within fifth month	
107 510	207 255	Plant filing fee	119 320	219 160	Notice of Appeal	
108 740	208 370	Reissue filing fee	120 320	220 160	Filing a brief in support of an appeal	
114 160	214 80	Provisional filing fee	121 280	221 140	Request for oral hearing	ļ
		138 1,510	138 1,510	Petition to institute a public use proceeding		
SUBTOTAL (1) (\$)		140 110	240 55	Petition to revive - unavoidable		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		141 1,280	241 640	Petition to revive - unintentional		
		Extra Claims below Fee Paid	142 1,280	242 640	Utility issue fee (or reissue)	
Total Claims Independent	23 -20*		143 460	243 230	Design issue fee	
Claims	2 - 3*	' = 0 x = 0	144 620	244 310	Plant issue fee	
Multiple Deper	ndent	L=L	122 130	122 130	Petitions to the Commissioner	
			123 50	123 50	Processing fee under 37 CFR 1.17(q)	
Large Entity Fee Fee	Small Entity Fee Fee	Fee Description	126 180	126 180	Submission of Information Disclosure Stmt	
Code (\$) 103 18	Code (\$) 203 9	Claims in excess of 20	581 40	581 40	Recording each patent assignment per property (times number of properties)	
102 84	202 42	Independent claims in excess of 3	146 740	246 370	Filing a submission after final rejection	
104 280	204 140	Multiple dependent claim, if not paid	149 740	249 370	(37 CFR § 1.129(a)) For each additional invention to be	
109 84	209 42	** Reissue independent claims over original patent			examined (37 CFR § 1.129(b))	
110 18 `	210 9	** Reissue claims in excess of 20 and over original patent	179 740	279 370	Request for Continued Examination (RCE)	
		and over original patent	169 900	169 900	Request for expedited examination of a design application	
SUBTOTAL (2) (\$) 794.00		Other fee (s	pecify)			
**or number previously paid, if greater; For Reissues, see above			*Reduced b	y Basic Filing	Fee Paid SUBTOTAL (3) (\$)	

SUBMITTED BY			Complete (ii	f applicable)
Name (Print/Type)	Catherine C. Maresh	Registration No. (Attorney/Agent) 35,268	Telephone	707-543-0221
Signature	Catherine Oya	rook	Date	Feb & 2008

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